

Date: [Date]

RE: [Patient Full Name]

DOB: [Date of Birth]

Date of Discharge: [Discharge Date]

Hospital: [Hospital Name]

Dear Dr. [Primary Care Physician Name],

Thank you for the opportunity to participate in the care of [Patient Name], who was recently hospitalized for [Primary Reason for Hospitalization]. I saw the patient in my office today for a post-hospitalization follow-up regarding their Chronic Kidney Disease (CKD).

Hospital Summary:

During the admission, the patient experienced [Acute Kidney Injury/Volume Overload/Electrolyte Imbalance]. Discharge creatinine was [Value] with an estimated GFR of [Value].

Current Status:

Today, the patient reports [Current Symptoms, e.g., stable edema, improved appetite]. Blood pressure in the clinic was [Reading].

Assessment:

1. Chronic Kidney Disease, Stage [Stage] (ICD-10: [Code])
2. [Secondary Diagnosis, e.g., Hypertension]
3. [Secondary Diagnosis, e.g., Anemia of CKD]

Plan:

- **Medication Changes:** [List changes or "None"]
- **Laboratory Orders:** [List upcoming labs: BMP, CBC, Urinalysis, etc.]
- **Dietary Instructions:** [e.g., Low sodium, Low potassium, Fluid restriction]
- **Follow-up:** The patient will return to the Nephrology clinic in [Timeframe].

I have advised the patient to avoid NSAIDs and contrast studies unless medically necessary. Please feel free to contact my office with any questions regarding this management plan.

Sincerely,

[Doctor Name, MD/DO]

[Practice Name]

[Phone Number]